



## SENIORS UNABLE TO ACCESS LIFESAVING CANCER THERAPIES DUE TO EXTRAORDINARY OUT-OF-POCKET COSTS

More than one million seniors in Medicare Part D face crippling cost-sharing for necessary therapies. The **RxCAP Act** (S. 1347) would establish an annual out-of-pocket spending cap in Part D to give much-needed relief to these seniors.

For decades, the Leukemia & Lymphoma Society (LLS) has been at the forefront of the fight to cure cancer. As a result, we have seen major breakthroughs in immunotherapy, genomics, and personalized medicine that have transformed some blood cancer diagnoses from a death sentence to a manageable chronic disease. Despite these exciting advances, many blood cancer patients are unable to access their drugs due to the extraordinarily high out-of-pocket costs seniors in a Medicare Part D plan must pay before receiving the medications that could save their lives.

### High cost-sharing impacts access to cancer treatments

Today, Part D patients with cancer and other serious diseases pay high out-of-pocket costs when their prescribed medication is placed on a plan formulary's "specialty tier." For drugs on a specialty tier, seniors are forced to pay a percentage of their drug's list price rather than a reasonable copay even when no other treatment option is available for their condition. This scheme often requires seniors to pay thousands of dollars every month in out-of-pocket costs—if the patient has the savings needed to fill the prescription at all. Too often, these high out-of-pocket costs result in patients cutting pills in half or forgoing their cancer treatments altogether. Research has found that seniors with high cost-sharing for cancer medications are 33% less likely to start their treatment.

### Plans are shifting more costs to cancer patients

Unfortunately for cancer patients with Part D coverage, the problem of high cost-sharing for cancer medications is only getting worse. Since 2015, every single Part D plan has used a specialty tier with cost-sharing that changes with the cost of the drug—called "coinsurance." The trend of replacing flat copays with coinsurance drastically increases what seniors must pay out-of-pocket for their prescription. At the same time, insurers are going even further by requiring this higher cost-sharing for more drugs. Without new protections, insurers who operate Part D plans will shift more costs onto the sickest beneficiaries.

### A solution that works for cancer patients

Cancer patients in employer health plans, individual health plans, Medicaid, and Medicare Advantage plans often depend on a vital patient protection that does not currently exist in Medicare Part D: an annual cap on out-of-pocket spending. Creating an annual out-of-pocket spending cap in Part D plans would dramatically lower seniors' cost-sharing for costly and often lifesaving drugs. The **RxCAP Act** (S. 1347) would establish an annual out-of-pocket spending cap at the dollar amount required to exit the donut hole portion of the Part D benefit. Today, more than one million seniors spend more than this level each year to access their prescriptions. This one reform would save these seniors hundreds—and often thousands—of dollars each year. LLS urges every Senator to cosponsor the RxCAP Act.